Entity Name: SPRING LAKE Subdivision Improvement District

Address: P. O. BOX 871652

Telephone: 504-650-2544 Email: fayjwooten@yahoo.com

This annual sworn financial statement is required to be filed with the Legislative Auditor within 90 days of the end of the entity's fiscal year by sending a pdf copy by email to ereports@lla.la.gov, faxing to 225-339-3986, or mailing to Louisiana Legislative Auditor — Local Government Services, P.O. Box 94397, Baton Rouge, LA 70804-9397.

AFFIDAVIT

Personally came and appeared before the undersigned authority, Fay J. Wooten (officer's name), who, duly sworn, deposes and says that the financial statements herewith given present fairly, in all material respects, the financial position of Spring Lake Subdivision Improvement District (entity's name) as of December 31, 2021 (entity's year-end) and the results of operations for the year then ended, in accordance with the basis of accounting described within the accompanying financial statements; that the entity has maintained a system of internal control structure sufficient to safeguard assets and comply with laws and regulations; and that the entity has complied with all laws and regulations, except as follows:

Complete if Applicable: In addition, Fay J. Wooten (officer's name), who duly sworn, deposes, and says that Spring Lake Subdivision Improvement District (entity's name) received \$75,000 or less in revenues and other sources for the year ended December 31, 2021 (entity's year-end), and accordingly, is not required to have an audit for the previously mentioned fiscal year.

OFFICER'S SIGNATURE OFFICER'S TITLE

Sworn to and subscribed before me, this 4th day of March , 20 22

NOTARY PUBLIC SIGNATURE & SEAL

Entity Name: SPRING LAKE Subdivision Improvement District Fiscal Year End: 12/31/2021

Statement of Receipts and Disbursements

Statement A

	General Fund	Other Fund	Total
DECEMPTO (Description of the control			
RECEIPTS (Provide Brief Description):	ф oo ooc	Φ.	# 00 000
1.Parcels and Fees	\$ 39,006	<u>\$</u>	\$ 39,006
2.Interest	110		110
3.			
4. 5.			
6. Total receipts (add lines 1 - 5)	\$ 39,116		\$ 39,116
DISBURSEMENTS (Provide Brief Description): 7. Security	\$ 23,280		\$ 23,280
8. Landscaping	1,500		<u>1,500</u>
9. Accounting	250		250
10.Utilities	1,160		1,160
11.Web-Site	652		652
12.Other	660		660
13. Total Disbursements (add lines 7 - 12)	\$ 27,502	_ \$	\$ 27,502
	\$ 11,614	\$	\$ 11,614
14. Change in fund balance (Lines 6 minus 13)			
14. Change in fund balance (Lines 6 minus 13) 15. Fund Balance at beginning of year	\$103,530	\$	\$103,530

Identify the Basis of Accounting, if not using Cash-Basis:

NOTE: If the entity receives any funds from pre- or post-adjudication court costs, fines, and/or fees, the entity must use one or more of the following categories in the receipts description fields: Civil Fees; Bond Fees; Asset Forfeiture/Sale; Pre-Trial Diversion Program; Criminal Court Costs/Fees; Criminal Contempt Fines; Other Criminal Fines; Restitution; and Probation/Parole/Supervision Fees.

Entity Name: SPRING LAKE Subdivision Improvement District Fiscal Year End: 12/31/2021

Balance Sheet			Statement B
	General Fund	Other Fund	Total
ASSETS (balances at year-end)			
1. Cash and cash equivalents	\$ 15,168	\$	\$ 15,168
2. Investments (fair value)			
Office furnishings (Cost of desks, etc)			
4. Equipment (Cost of fax machine, etc)			
5. Other (brief description)Cash held by CONO	<u>99,976</u>		99,976
6. Total Assets (add lines 1 - 5)	\$115,144	_ \$	\$115,144
LIABILITIES AND FUND BALANCE (at year-end):			
7. Liabilities (brief description):	\$	\$	\$
8.			
9.			
10.			
11. Total Liabilities (add lines 7 - 10)			
12. Fund balance (amount from Line 16 on Statement A)	\$115,144		\$115,144
13. Other			
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$115,144	\$	\$115,144

Entity Name: SPRING LAKE Subdivision Improvement District Fiscal Year End: 12/31/2021

Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name and Title: Karen Comeaux: President

Purpose	Dollar Amount
1. Salary	1.
2. Benefits-insurance	2.
3. Benefits-retirement	3.
4. Benefits-other (describe)	4.
5. Benefits-other (describe)	5.
6. Benefits-other (describe)	6.
7. Car allowance	7.
8. Vehicle provided by government (if reported on your W-2)	8.
9. Per diem	9.
10. Reimbursements	10.
11. Travel	11.
12. Registration fees	12.
13. Conference travel	13.
14. Housing	14.
15. Unvouchered expenses (example: travel advances, etc.)	15.
16. Special meals	16.
17. Other	17.
18. TOTAL (enter total of line 1-17)	18.

_XX_Please check here if the Agency Head does not receive any compensation, benefits, and other payments. (Act 462 of the 2015 Legislative Session allows nongovernmental entities or not-for-profit (quasi-public) entities to report on the Act 706 schedule **only** those payments to the agency head that are derived from the public funds.)